

CERTIFICATE NO: _____

DATE ISSUED: _____

Application to the HISTORIC DISTRICT COMMISSION, Nantucket, Massachusetts, for a

CERTIFICATE OF APPROPRIATENESS

for structural work.

All blanks must be filled in using BLUE OR BLACK INK (no pencil) or marked N/A.

NOTE: It is strongly recommended that the applicant be familiar with the HDC guidelines, *Building with Nantucket in Mind*, prior to submittal of application. Please see other side for submittal requirements. Incomplete applications will not be reviewed by the HDC.

This is a contractual agreement and must be filled out in ink. An application is hereby made for issuance of a Certificate of Appropriateness under Chapter 395 of the Acts and Resolves of Mass., 1970, for proposed work as described herein and on plans, drawings and photographs accompanying this application and made a part hereof by reference.

The certificate is valid for three years from date of issuance. No structure may differ from the approved application. Violation may impede issuance of Certificate of Occupancy.

PROPERTY DESCRIPTION

TAX MAP N^o: 54 PARCEL N^o: 265
Street & Number of Proposed Work: 40 DOLPIS ROAD
Owner of record: 40 DOLPIS RD LLC-STEVE SLOSEK
Mailing Address: 40 DOLPIS ROAD
NANTUCKET, MA 02554
Contact Phone #: _____ E-mail: _____

AGENT INFORMATION (if applicable)

Name: DAVIDA WITCZAK
Mailing Address: PO BOX 1446
NANTUCKET, MA 02554
Contact Phone #: 508-221-0432 mail: CZARINA.LINDA@COMCAST.NET

FOR OFFICE USE ONLY

Date application received: _____ Fee Paid: \$ _____
Must be acted on by: _____
Extended to: _____
Approved: _____ Disapproved: _____
Chairman: _____
Member: _____
Member: _____
Member: _____
Member: _____
Member: _____
Notes - Comments - Restrictions - Conditions

DESCRIPTION OF WORK TO BE PERFORMED

See reverse for required documentation.

- New Dwelling Addition Garage Driveway/Apron Commercial Historical Renovation Deck/Patio Steps Shed
 - Color Change Fence Gate Hardscaping Move Building Demolition Revisions to previous Cert. No. _____
 - Pool (Zoning District _____) Roof Other _____
- Size of Structure or Addition: Length: _____ Sq. Footage 1st floor: _____ Decks/Patio: Size: _____ 1st floor 2nd floor
Width: _____ Sq. footage 2nd floor: _____ Size: _____ 1st floor 2nd floor
Sq. footage 3rd floor: _____

Difference between existing grade and proposed finish grade: North _____ South _____ East _____ West _____
Height of ridge above final finish grade: North _____ South _____ East _____ West _____

Additional Remarks

Historic Name: 1960 REVISIONS* 1. East Elevation CHANGE 3 TAB DUAL GRAY ROOF
Original Date: (describe) 2. South Elevation TO MORE BLACK ARCH & TEXTURALS
Original Builder: 3. West Elevation
Is there an HDC survey form for this building attached? Yes N/A 4. North Elevation
*Cloud on drawings and submit photographs of existing elevations.

DETAIL OF WORK TO BE PERFORMED

Foundation: Height Exposed _____ Block Block Parged Brick (type) _____ Poured Concrete Piers

Masonry Chimney: Block Parged Brick (type) _____ Other _____

Roof Pitch: Main Mass _____ /12 Secondary Mass _____ /12 Dormer _____ /12 Other _____

Roofing material: Asphalt: 3-Tab Architectural
 Wood (Type: Red Cedar, White Cedar, Shakes, etc.)

Skylights (flat only): Manufacturer _____ Rough Opening _____ Size _____ Location _____
Manufacturer _____ Rough Opening _____ Size _____ Location _____

Gutters: Wood Aluminum Copper Leaders (material)

Leaders (material and size):

Sidewall: White cedar shingles Clapboard (exposure: _____ inches) Front Side
 Other _____

Trim: A. Wood Pine Redwood Cedar Other _____
B. Treatment Paint Natural to weather Other _____
C. Dimensions: Fascia NO Rake _____ Soffit (Overhang) _____ Corner boards _____ Frieze _____
Window Casing _____ Door Frame _____ Columns/Posts: Round _____ Square _____

Windows*: Double Hung Casement All Wood Other _____
 True Divided Lights (muntins), single pane SDL's (Simulated Divided Lights) Manufacturer _____

Doors* (type and material): TDL SDL Front _____ Rear _____ Side _____
Garage Door(s): Type _____ Material _____

Hardscape materials: Driveways _____ Walkways _____ Walls _____

* Note: Complete door and window schedules are required.

COLORS

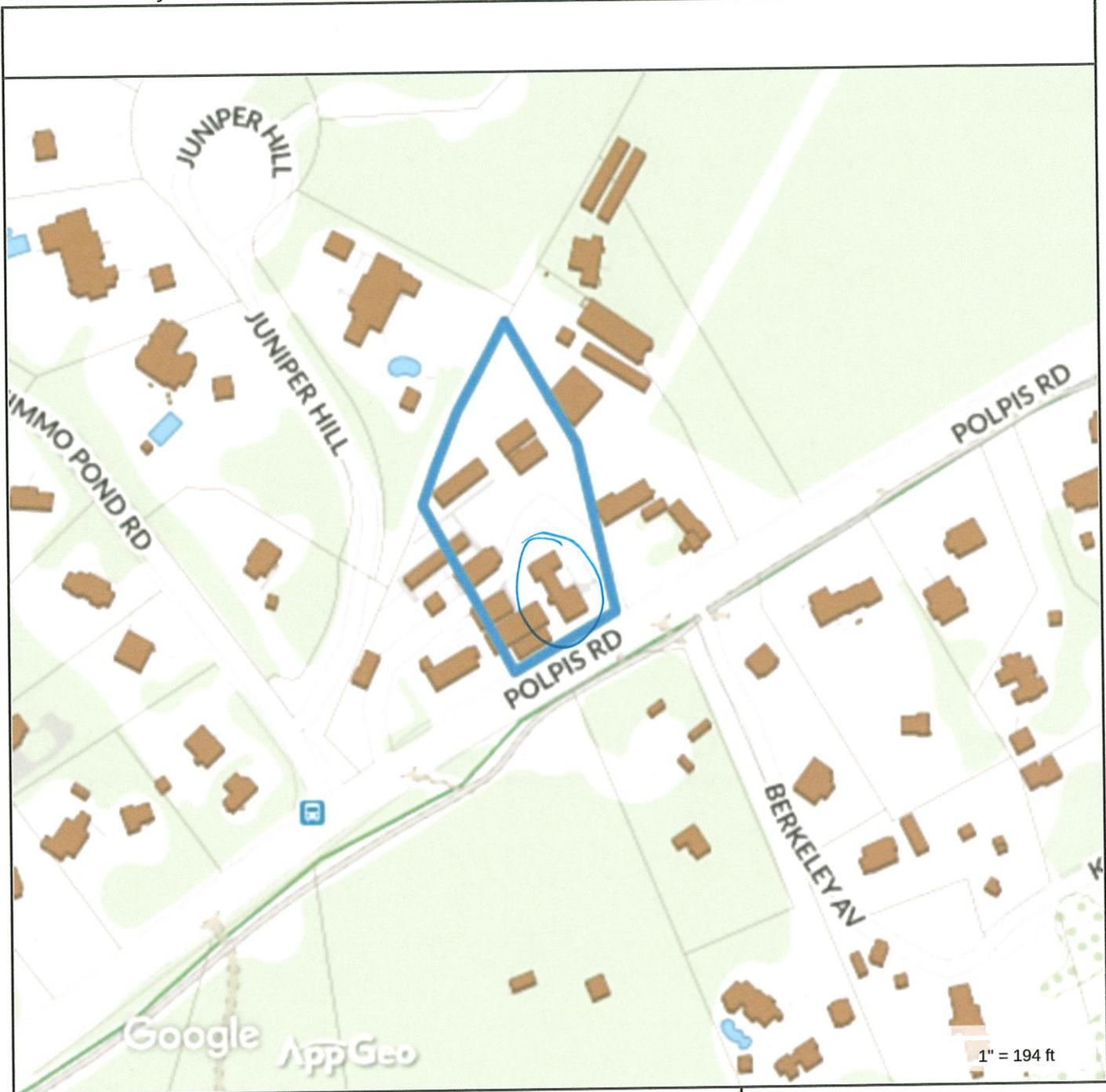
Sidewall _____ Clapboard (if applicable) _____ Roof MORE BLACK
Trim _____ Sash _____ Doors _____
Deck _____ Foundation _____ Fence _____ Shutters _____

* Attach manufacturer's color samples if color is not from HDC approval list.

I hereby authorize the agent named above to act on my behalf to make changes in the specifications or the plans contained in this application in order to bring the application into compliance with the HDC guidelines. I hereby agree to abide by and comply with the terms and conditions of this application. I hereby agree that the submission of any revisions to this application will initiate a new sixty-day review period.

Date 6/3/2025 Signature of owner of record _____ Signed under penalties of perjury

TO BE
Scanned
Copy



Property Information

Property ID 54 265
Location 40 POLPIS RD
Owner FORTY POLPIS RD LLC



**MAP FOR REFERENCE ONLY
NOT A LEGAL DOCUMENT**

Town and County of Nantucket, MA makes no claims and no warranties, expressed or implied, concerning the validity or accuracy of the GIS data presented on this map.

Geometry updated 11/13/2018
Data updated 11/19/2018



Property Information

Property ID 54 265
Location 40 POLPIS RD
Owner FORTY POLPIS RD LLC



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JUN 03 2020
By _____

